

**THE ROLE OF JUDGES IN MANAGING JUVENILE SEX OFFENSE CASES:
KEYS TO INFORMED DECISIONMAKING**

A Judicial Education Curriculum Pilot Test: Michigan

Post-Training Evaluation

A critical aspect of this SJI-sponsored judicial education project is to assess the impact of the training on participants' understanding of key issues relative to juvenile sex offenders and current offender management practices, and to identify ongoing needs for information or assistance. As such, although you may have answered some of these questions prior to the training, we respectfully request that you complete this questionnaire now that you have participated in the training event. Please return the questionnaire to any of the faculty or staff immediately following the conclusion of the training. All responses will remain anonymous. Thank you in advance for your invaluable assistance!

1. What were the three most noteworthy pieces of information about juvenile sex offenders or juvenile sex offender management that you heard today?

1) _____

2) _____

3) _____

2. Was this training event responsive to your questions about your role in managing juvenile sex offense cases and your need for information on juvenile sex offender management?

Not at All

Definitely

1

2

3

4

5

3. Will information from this training event assist you on a day-to-day basis as you preside over juvenile sex offense cases?

___ Yes

___ No

Please explain:

4. Were there any critical topics that were not covered sufficiently in this training event?

___Yes

___No

Please list:

5. Would you recommend this training to other judges in your state?

___Yes

___No

6. Now that you have participated in the training event, please rate your level of knowledge about juvenile sex offenders and their management:

None

Extensive

0 1 2 3 4 5 6 7 8 9 10

Now that you have participated in the training event, please indicate your current level of agreement or disagreement with the following statements:

STRONGLY DISAGREE
DISAGREE
AGREE
STRONGLY AGREE

- | | | | | | |
|-----|-----------------------|-----------------------|-----------------------|-----------------------|--|
| 7. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | Advances in risk prediction with juvenile sex offenders now allow professionals to predict – with a moderate degree of accuracy – the likelihood that a juvenile will reoffend sexually. |
| 8. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | With specialized training and experience, professionals can identify whether an individual matches the profile of a typical juvenile sex offender. |
| 9. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | Juvenile sex offenders can be managed safely in the community. |
| 10. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | Juvenile sex offender registration has been found to reduce recidivism. |
| 11. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | It is generally necessary to inform school personnel when a juvenile sex offender is enrolled in school. |

	STRONGLY DISAGREE	DISAGREE	AGREE	STRONGLY AGREE	
12.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	When the results of a polygraph are found to be deceptive, the juvenile sex offender is at a high risk to reoffend.
13.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Most behaviors that are labeled as sex offending are actually the result of curiosity or experimentation on the part of the juveniles.
14.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Other than age and size, juvenile sex offenders are similar to adult sex offenders in most ways.
15.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	When a juvenile commits a sex offense against a young child in the home, the victim must be removed from the home to ensure his or her safety.
16.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Because many adult sex offenders began perpetrating as juveniles, a juvenile who commits a sex offense will likely continue offending as an adult.
17.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Families of juvenile sex offenders must be required to participate in treatment.
18.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Co-occurring psychiatric disorders such as depression are common underlying causes of juvenile sex offending behavior.
19.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	The names of juvenile sex offenders should generally be maintained on sex offender registries into adulthood.
20.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Juveniles who commit sex offenses have lower rates of recidivism than adult sex offenders.
21.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Although fairly common, masturbation is a behavior that signals increased risk among juvenile sex offenders.
22.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	To the extent possible, juvenile sex offenders must be prohibited from engaging in most extracurricular activities.
23.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Most mental health professionals are qualified to treat juvenile sex offenders.
24.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	There is a relatively strong cause-effect relationship between having been victimized as a child and committing sex offenses as a juvenile.
25.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Victims of juvenile sex offenders do not suffer as much psychological damage as victims of adult sex offenders.
26.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Specialized treatment has been found to reduce recidivism among juvenile sex offenders.
27.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Deviant sexual arousal is common among juvenile sex offenders.

	STRONGLY DISAGREE	DISAGREE	AGREE	STRONGLY AGREE	
28.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Although confidentiality is a necessary feature of the juvenile court system, treatment providers should nonetheless share information routinely about the juvenile sex offenders they treat with other professionals involved in the management process.
29.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Hormonal treatment (e.g., Depo Provera, Lupron) is an effective treatment for most juvenile sex offenders.
30.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Registration and community notification laws should be equally applied to juvenile and adult sex offenders.
31.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Juveniles should not be released to the community if they have not fully completed sex offense-specific treatment.
32.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	When making an adjudication finding, courts should rely on an assessment conducted by an experienced mental health professional with specialized training in juvenile sex offender management.
33.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Most juvenile sex offenders do not need to remain under intensive supervision throughout their tenure of probation/parole.
34.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Juveniles adjudicated for statutory rape generally do not require sex offense-specific treatment interventions because the behavior is often consensual, and simply meets the legal definition of a sex offense.
35.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Standard or traditional supervision conditions may not be adequate for juvenile sex offenders.
36.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	The polygraph is a reliable measure for assessing risk to reoffend among juvenile sex offenders.
37.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	The implementation of registration and community notification laws can have negative effects on juvenile sex offenders and their families.
38.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	When victims of juvenile sex offenders recant their stories, they do so primarily because the allegations are untrue.
39.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	When juveniles who commit sex offenses recidivate, it is usually with non-sex offenses.
40.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Date rape committed by juveniles generally does not require sex offense-specific interventions.

41. Please provide your age: _____

42. Your gender: F M

43. Number of years on the bench: _____

44. Estimated number of juvenile sex offense cases over which you have presided: _____

45. Please include other comments and feedback you believe would be helpful in developing a training curriculum on judicial decisionmaking in juvenile sex offense cases and improving training events like this one.

Thank you!